

1.US FOREST	PROVICE CONTRACTOR		NT OR AGREEMENT		PAGE	OF PA
11-FI-11050	DERVICE GRANT/AGREEMENT NO	MBER: 2. RECIPIEN	T/COOPERATOR CRANE		1	
AOREE		AUREEMEN	T NUMBER, IF ANY:	3. MODIFIC.	ATION NUMB	ER:
4. NAME/ADDRE	SS OF U.S. FOREST SERVICE UNIT	ADMINISTERING		1 -		
Inyo Nationa		zip + 4):	5. NAME/ADDRESS OF U.S. FOR PROJECT/ACTIVITY (unit page)	REST SERVICE UN	IT ADMINIST	ERING
351 Page Los	u rorest		PROJECT/ACTIVITY (unit name, Jeff Iler, FMO	street, city, state, and	d zip + 4);	
6. NAME/ADDRES	ne, Ste 200; Bishop, CA 92 SS OF RECIPIENT/COOPERATOR (S	3514	351 Pacu Lane Suite 20	n. Bishon C	4 02514	
		treet, city, state, and zip		HHS SUB ACCOUN	4 93514	T. T.
Bishop Fire I	Department		payment use only):		TI NOMBER (ror HHS
PO Box 1236	, Bishop, CA 93514					
BLM, Bishop	Field Office					
351 Pacu Lan	e, Bishop, CA 93514					
	8	PURPOSE OF	MODIFICATION			
CHECK ALL	1 1113 mounication is issi	Ded nurguant to t	ho madification			
THAT APPLY:	referenced in item no. 1	. above	he modification provision in	the grant/agr	eement	
\boxtimes	CHANGE IN PERFORMAN	CE PERIOD: 05/2	3/2012 05/22/2012	·		
	CHANGE IN FUNDING:	1000.0572.	03/2012-03/23/2013			·····
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	OTHER (Specify type of mod	dification):				
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DANA MEES

U.S. Forest Service Grants & Agreements Specialist

OMB 0596-0217 FS-1500-19

12. G&A REVIEW						
12 A. The authority and format of this modification have been reviewed and approved for signature by:	12.B. DATE SIGNED					



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